

City of Fort Lauderdale
Building Services Department
Telephone 954-828-6520

Application No. _____

THIS FORM MUST ACCOMPANY ALL AIR CONDITIONING REPLACEMENT PERMIT APPLICATIONS. EACH UNIT CHANGE-OUT MUST BE ON ITS OWN DATA SHEET. MULTIPLE UNITS ON SINGLE SHEETS ARE NOT ACCEPTABLE.

AIR CONDITIONING REPLACEMENT DATA

CONTRACTOR: _____ DATE: _____

SITE ADDRESS: _____ APT: _____

LOT: _____ BLOCK: _____ SUBDIVISION: _____

UNIT BEING REPLACED	DATA	NEW UNIT
	MANUFACTURER	
	PKG. UNIT MODEL	
	COND. UNIT MODEL	
	AHU/COIL MODEL	
	KW HEAT	
	NOM TONS	
AHU CU PKG	1) M.C.A.	AHU CU PKG
AHU CU PKG	2) M.O.P.	AHU CU PKG
AHU CU PKG	3) VOLTS	AHU CU PKG
PKG UNIT / /		PKG UNIT / /
	EER/SEER	
YES NO	DUCTS	YES NO
YES NO	THERMOSTAT	YES NO
YES NO	SMOKE DETECTORS	YES NO
YES NO	NEW STAND / CURB	YES NO

LADDER REQUIRED FOR INSPECTION YES _____ NO _____

CHANGE DISCONNECTING MEANS YES _____ NO _____

SIGNATURE: _____

FLORIDA STATE CERTIFICATION/REGISTRATION NO. _____

BROWARD CTY/CERTIFICATE OF COMPETENCY NO. _____

APPROVED BY: _____ DATE: _____

- 1) MINIMUM CIRCUIT AMPACITY (WIRE SIZE) _____
- 2) MAXIMUM OVERCURRENT PROTECTION (FUSE/BREAKER SIZE) _____
- 3) VOLTAGE OF CIRCUIT (208/240/480) _____
- 4) SIZE DISCONNECTING MEANS _____